

# CLAIMS ONLY

SERIAL NO 1234567890	FILING DATE
APPLICANT'S	

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
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49						
50						
TOTAL IND	2					
TOTAL DEP	2					
TOTAL CLAIMS	2					

*	*	*	*	*	*
IND.	DEP.	IND.	DEP.	IND.	DEP.
51					
52					
53					
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98					
99					
100					
TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS